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Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Date 10 / 14 / 03
Mo. Day Yr.

Atty. Docket 03500.014598
Application No. 09/606,522

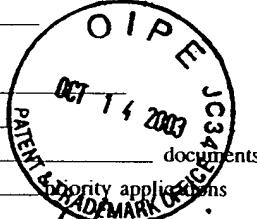
Sir:

Kindly acknowledge receipt of the accompanying:

Response to Official Action. _____
 Check for \$ _____ (claims fee)
 Petition under 37 CFR 1.136 and Check for \$ _____
 Notice of Appeal and Check for \$ _____
 Information Disclosure Statement, PTO-1449 and _____ documents
 Claim for priority and certified copies of _____
 Issue fee transmittal and Check for \$ _____
 Other (specify) Supplemental Amendment/Transmittal
by placing your receiving date stamp hereon and returning to deliverer.

FCHS-D-00

Atty. JL/JM Due Date 11/3/03
Mo. Day Yr.



In re Application of:

HIDEO UKUDA

Appln. No.: 09/606,522

Filed: June 30, 2000

For: OPTICAL MATERIAL AND OPTICAL
SYSTEM USING IT



Docket No. 03500.014598

Examiner: E. Cain

Group Art Unit: 1714

Date: October 14, 2003

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is a Supplemental Amendment in the above-identified application.

No additional fee is required.

The fee has been calculated as shown below:

CLAIMS AS AMENDED						
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	25	MINUS	195	= 0	x \$ 9 \$18	\$ 0.00
INDEP. CLAIMS	20	MINUS	20	0	x \$42 \$84	\$0.00
Fee for Multiple Dependent claims \$140/\$280						
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT--						\$0.00

°Verified Statement claiming small entity status is enclosed, if not filed previously.

A check in the amount of \$____ is enclosed.

Charge \$____ to Deposit Account No. 06-1205. A duplicate of this sheet is enclosed.

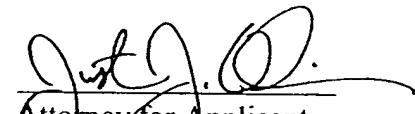
Any prior general authorization to charge an issue fee under 37 C.F.R. § 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. §§ 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate of this paper is enclosed.

A check in the amount of \$____ to cover the Extension fee for response within ____ months is enclosed.

A check in the amount of \$____ to cover the Information Disclosure Statement fee is enclosed.

Applicant's undersigned attorney may be reached in our Washington, D.C. office by telephone at (202) 530-1010. All correspondence should continue to be directed to our address given below.

Respectfully submitted,


Attorney for Applicant
Justin J. Oliver
Registration No. 44,986

FITZPATRICK, CELLA, HARPER & SCINTO
30 Rockefeller Plaza
New York, New York 10112-3801
Facsimile: (212) 218-2200

JJO/tmm



03500.014598

PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:)
HIDEO UKUDA) : Examiner: E. Cain
Appln. No.: 09/606,522) : Group Art Unit: 1714
Filed: June 30, 2000) :
For: OPTICAL MATERIAL AND) :
OPTICAL SYSTEM USING IT : October 14, 2003

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

SUPPLEMENTAL AMENDMENT

Sir:

Further to the Amendment timely filed on September 15, 2003, please amend the above-identified application as follows.